


PROVIDER BULLETIN

No. 13-27

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TO: Medicaid Providers of Nursing Facilities Services

FROM: Vivianne M. Chaumont, Director 
Division of Medicaid & Long-Term Care

BY: Joette Novak, Program Specialist

RE: Nebraska Medicaid Minimum Data Set (MDS) Requirements

This Provider Bulletin replaces Provider Bulletin 10-50 dated September 22, 2010 and is intended to provide information about immediate updates to the State-specific requirements regarding MDS (Minimum Data Set) OBRA assessment completion and submission.

Nebraska Medicaid claims will begin to edit against these items in the MMIS with the elimination of the prior authorization process. Accurate and timely MDS assessments will assure accurate and timely claim payments.

Nebraska Medicaid MDS Requirements

- **Section S - state-specific data fields**

Nebraska Medicaid requires that Section S be completed only when an individual residing in a Medicaid certified bed does not have a social security number. The revised Section S form and instructions are located in Appendix 471-000-45, which is available on the DHHS website at: <http://www.hhs.state.ne.us/reg/appx/atc471.htm>

- **Section A1300B - Resident Room Number**

Nebraska Medicaid can only pay for and collect MDS data for nursing facility services when an individual resides in a Medicaid-certified bed. If less than 100% of its beds are Medicaid-certified, the facility must enter the resident's room number.

- **Section A0700 Medicaid Number**

Valid entries for Medicaid Number are either a "+" for "pending", "N" for "not

applicable”, or leave blank. If a Medicaid number exists for the resident, it must be a valid 11-digit Medicaid number. If the entry is not accurate the assessment will not be accepted.

- Section A0900 Date of Birth

The resident’s date of birth must match the one identified within the Medicaid eligibility system for a Medicaid resident. If the date of birth is not accurate the assessment will not be accepted.

- Section A2400B and A2400C Start and End of most recent Medicare stay

This field is to be completed for any residents with a Medicare covered stay. If a Medicare Start date is entered you must also enter the Medicare End date when it occurs.

For questions regarding the information in this bulletin, please contact Joette Novak at joette.novak@nebraska.gov or 402-471-9279.